Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 1 of 56

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identify Yourself | | |
|-----|--|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | | e the name that is on | Husam | |
| | your government-issue picture identification (for example, your driver's | ure identification (for mple, your driver's | First name | First name |
| | licen | ise or passport). | Middle name | Middle name |
| | | g your picture | Abdelqader | |
| | | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | | other names you have d in the last 8 years | | |
| | | ide your married or den names. | | |
| 3. | youi num Indi | y the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number | xxx-xx-4280 | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 2 of 56

Case number (if known)

Debtor 1 Husam Abdelqader

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 3814 W 116th Place | If Debtor 2 lives at a different address: | | | |
| | | Garden Homes, IL 60803 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Cook | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

Entered 04/20/16 15:13:18 Desc Main Page 3 of 56 Case 16-13487 Doc 1 Filed 04/20/16

Document Case number (if known) Debtor 1 Husam Abdelqader

| Par | Tell the Court About | Your B | Bankruptcy Ca | se | | | | |
|------------|--|---|-------------------------------|---|--|--|------------------|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
| | choosing to file under | ■ C | hapter 7 | | | | | |
| | | Πс | hapter 11 | | | | | |
| | | □с | hapter 12 | | | | | |
| | | □с | hapter 13 | | | | | |
| | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Ty _l attorney is sub | pically, if you are paying the fee yo | k with the clerk's office in your local court for burself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card | eck, or money | |
| | | | | | stallments. If you choose this option to (Official Form 103A). | on, sign and attach the Application for Individ | duals to Pay | |
| | | | but is not requapplies to you | uired to, waive ır family size a | your fee, and may do so only if yound you are unable to pay the fee in | n only if you are filing for Chapter 7. By law, our income is less than 150% of the official point installments). If you choose this option, you cial Form 103B) and file it with your petition. | overty line that | |
|) . | Have you filed for bankruptcy within the | ■ Ne | 0. | | | | | |
| | last 8 years? | ☐ Ye | es. | | | | | |
| | | | District | - | When | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy | ■ No | n | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | | | | | | |
| | annate: | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your | ■ No | Go to li | ne 12. | | | | |
| | residence? | □ Ye | _{es.} Has yo | ur landlord obt | ained an eviction judgment agains | t you and do you want to stay in your reside | nce? | |
| | | | | No. Go to line | 12. | | | |
| | | | | Yes. Fill out <i>Ir</i> bankruptcy pe | | Judgment Against You (Form 101A) and file | it with this | |
| | | | | | | | | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main

Document Page 4 of 56 Case number (if known) Debtor 1 Husam Abdelgader Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 5 of 56

Debtor 1 Husam Abdelqader

Abdelqader Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 6 of 56

Case number (if known) Debtor 1 **Husam Abdelgader** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Husam Abdelqader Signature of Debtor 2 Husam Abdelgader Signature of Debtor 1 Executed on April 14, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 7 of 56

Debtor 1 Husam Abdelqader Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Thomas W. Lynch | Date | April 14, 2016 | |
|---|---------------|----------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| Thomas W. Lynch Printed name | | | |
| Law Office of Thomas W. Lynch, P.C. | | | |
| Firm name | | | |
| 9231 S. Roberts Road Hickory Hills, IL 60457 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone (708) 598-5999 | Email address | twlpc@att.net | |
| 6194247 | | | |
| Bar number & State | | | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main

| | | DOCHM | eni Pade 8 oi 50 | <u> </u> | |
|---------------------|--------------------------|-------------------|------------------|----------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Husam Abdelqad | er | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 11: Summarize Your Assets | | |
|-----|---|-------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 62,500.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 3,630.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 66,130.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities at you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 114,122.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 114,676.67 |
| | Your total liabilities | \$ | 228,798.67 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,213.23 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,015.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sc | hedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal | , family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main

Debtor 1 Husam Abdelgader Document Page 9 of 56
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,327.09

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total c | laim |
|--|---------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Ca | se 16-1348 | 37 Doc 1 | Filed 04/20/16 Document | Entered 04/20/2 Page 10 of 56 | l6 15:13:1 | 8 Des | sc M | lain |
|----------------------------|--|----------------------------------|------------------------------|--|---|------------------------------------|--|---------|--|
| Fill | in this inform | ation to identify | y your case and th | nis filing: | | | | | |
| Deb | otor 1 | Husam Abo | lelqader | | | | | | |
| Dok | otor 2 | First Name | Middle | e Name | Last Name | | | | |
| | use, if filing) | First Name | Middle | e Name | Last Name | | | | |
| Uni | ted States Bar | kruptcy Court fo | r the: NORTHER | N DISTRICT OF ILLI | NOIS | | | | |
| Cas | se number | | | | _ | | | | Check if this is an amended filing |
| SC n ea hink nfor | chedule ch category, se c it fits best. Be | as complete and space is needed. | roperty describe items. List | e. If two married people | an asset fits in more than on e are filing together, both are e top of any additional page: | equally respon | sible for su | pplying | g correct |
| | | | | | vn or Have an Interest In | | | | |
| 1.1 | Yes. Where is | the property? | | What is the property | y? Check all that apply | | | | |
| | 3814 W 11 | | | Single-family l | home | Do not deduct | secured cla | ims or | exemptions. Put |
| | Street address, if | available, or other de | escription | ⊔ · | Iti-unit building or cooperative | | | | s on Schedule D: ured by Property. |
| | Garden Ho | omes IL State | 60803-0000 ZIP Code | ☐ Manufactured☐ Land☐ Investment pro | or mobile home | Current value entire proper \$125, | | | ent value of the on you own? \$62,500.00 |
| | | | | ☐ Timeshare ☐ Other Who has an interest | t in the property? Check one | (such as fee | Describe the nature of your ownership i (such as fee simple, tenancy by the enti a life estate), if known. | | |
| | 0 1 | | | Debtor 1 only | | | | | |
| | Cook | | | Debtor 2 only | | | | | |
| | County | | | ☐ Debtor 1 and ☐ At least one o | Debtor 2 only f the debtors and another | ☐ Check if (see instru | this is com | munity | property |
| | | | | /11.0001.0110.0 | ou wish to add about this ite | , | , | | |
| | | | | non-filing spou | esidence. Purchased i se. value according to nat similar homes in h | Epprasial is | \$165,00 | 0. Ho | owever |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$62,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| D | ebtor 1 | Case 16 | | | Filed 04/20/16 Document | Entered 04/20 Page 11 of 56 | /16 15:13:18 use number (if known) | Desc Main | |
|-----------------|--------------|--|--------------|-------------------------------------|--|--------------------------------|------------------------------------|---|----------|
| | | | | | icles, motorcycles | | ise namber (ii known) | | |
| | | iiis, ii doks, iii | actors, sp | ort dillity veri | icies, motorcycles | | | | |
| | □ No | | | | | | | | |
| | Yes | | | | | | | | |
| 3 | 3.1 Make | e: Honda | | | Who has an interest in the | e property? Check one | | red claims or exemption schools | |
| | Mode | el: Passpo | ort | | Debtor 1 only | | | e Claims Secured by F | |
| | Year | | | | Debtor 2 only | | Current value of the | | |
| | | oximate mileage | | 170,000 | Debtor 1 and Debtor 2 o | • | entire property? | portion you o | wn? |
| | Otne | er information: | | | At least one of the debto | ors and another | | | |
| | | | | | Check if this is common (see instructions) | unity property | \$700 . | 00 | \$700.00 |
| 5 P a | .pages y | ou have atta | ched for P | art 2. Write th | for all of your entries from the front of the following the following the followers in any of the follow | | | \$7 | 00.00 |
| | Househ | old goods an | d furnishiı | ngs | china, kitchenware | | | portion you ov Do not deduct s claims or exem | secured |
| | □ No | oo. Major appr | arioco, rari | intaro, inforio, | oriiria, kitorioriwaro | | | | |
| | Yes. | Describe | | | | | | | |
| | | | | terest in kit iling so-sig | chen, living room and ner | d bedroom furniture, | joint w/ | \$ | 1,000.00 |
| 7. | □ No | es: Televisions | | | o, stereo, and digital equip dia players, games | oment; computers, printe | rs, scanners; music cc | llections; electronic | devices |
| | | | | household outer and tal | electronics including blet | յ 5 televisions, laptoլ | p | | \$400.00 |
| 8. | Example ■ No | other colle | | s; paintings, p morabilia, colle | rints, or other artwork; boo ectibles | oks, pictures, or other art | objects; stamp, coin, | or baseball card coll | ections; |
| | ⊔ Yes. | Describe | | | | | | | |
| 9. | Example No | ent for sports es: Sports, pho musical ins Describe | otographic, | | dother hobby equipment; | bicycles, pool tables, gol | f clubs, skis; canoes a | nd kayaks; carpentr | y tools; |

| | Case 16-2 | 13487 | Doc 1 | Filed 04/20/16 Document | Entered 04/20/16 15:1 Page 12 of 56 | l3:18 D | esc Main |
|---|--|--------------|------------------|---|--|----------------|--|
| Debtor 1 | Husam Abde | elqader | | Document | Case number | (if known) | |
| ■ No | | s, shotguns | s, ammunition | , and related equipment | t | | |
| 11. Cloth <i>Exai</i> □ No | | othes, furs, | leather coats | s, designer wear, shoes, | accessories | | |
| ■ Yes | s. Describe | | | | | | |
| | | person | al wearing | apparel | |] | \$500.00 |
| ■ No | | welry, cost | ume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watches | s, gems, gold | , silver |
| Exar ■ No | farm animals mples: Dogs, cats, l | birds, hors | es | | | | |
| | s. Describe | | | | | | |
| ■ No | other personal and | | - | ı did not already list, iı | ncluding any health aids you did r | ot list | |
| | | • | | om Part 3, including a | ny entries for pages you have atta | ched | \$1,900.00 |
| | Describe Your Finance | | uitable intere | est in any of the follow | ina? | | Current value of the |
| Do you (| own or nave any is | egai oi eq | unable intere | ast in any or the follow | mg. | | portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | mples: Money you h | • | • | our home, in a safe depo | osit box, and on hand when you file y | our petition | |
| | | | | | pocket c | ash | \$1,000.00 |
| Exar | institutions. | | | l accounts; certificates counts with the same ins | | okerage hou | ses, and other similar |
| ■ Yes | S | | | | | iaint w/ | |
| | | 17.1. | Checking | | st in account at Chase Bank, j co-signer (50% of \$60.00) | oint w/ | \$30.00 |
| | ls, mutual funds, amples: Bond funds, | | | ks th brokerage firms, mor | ney market accounts | | |
| ` | S | Ir | nstitution or is | suer name: | | | |
| | publicly traded stored venture | ock and in | nterests in in | corporated and uninco | orporated businesses, including a | ın interest in | an LLC, partnership, and |
| | s. Give specific info | ormation a | bout them | | | | |

| | Case 16-13487 | Doc 1 | Filed 04/20/16 Document | Entered 04/20/16 15:13:18 Page 13 of 56 | Desc Main |
|-----------------------------|--|--|---|---|---|
| Debtor 1 | Husam Abdelqader | | Boodinone | Case number (if known) | |
| | Nam | e of entity: | | % of ownership: | |
| Negot Non-n ■ No | egotiable instruments are the | ersonal check nose you can | s, cashiers' checks, pror | egotiable instruments nissory notes, and money orders. by signing or delivering them. | |
| Exam _l | ment or pension accounts ples: Interests in IRA, ERISA | | 1(k), 403(b), thrift saving | s accounts, or other pension or profit-sharing | plans |
| ■ No □ Yes. | List each account separate Type of | ly. f account: | Institution n | ame: | |
| Your s Examp | | you have ma | | inue service or use from a company stric, gas, water), telecommunications compa | nies, or others |
| ■ No □ Yes. | | | Institution n | ame or individual: | |
| 3. Annuit ■ No □ Yes | | c payment of | | life or for a number of years) | |
| 26 U.S. | ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a | | | gram, or under a qualified state tuition pr | ogram. |
| ■ No □ Yes | Institution na | ame and desc | cription. Separately file th | ne records of any interests.11 U.S.C. § 521(c) |): |
| ■ No | | | erty (other than anythin | g listed in line 1), and rights or powers ex | ercisable for your benefit |
| 6. Patent Examp ■ No | Give specific information a s, copyrights, trademarks ples: Internet domain names Give specific information a | , trade secre s, websites, p | | | |
| Exam _l ■ No | | sive licenses | | n holdings, liquor licenses, professional licens | ses |
| ☐ Yes. | Give specific information a | bout them | | | |
| Money or | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No | funds owed to you Give specific information al | pout them, in | cluding whether you alre | ady filed the returns and the tax years | |
| | • | | - | · | |
| | | | interest in 2015 incorreceived, joint w/ no (50% of \$8000.00), u | n-filing so-signer sed funds to pay | \$0.00 |
| | | | | • | |
| 9. Family | | alimony, spo | usal support, child suppo | ort, maintenance, divorce settlement, propert | y settlement |

■ No

☐ Yes. Give specific information......

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Page 14 of 56

Case number (if known) Document Debtor 1 **Husam Abdelqader** 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: term life insurance, no cash value \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,030.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

54. Add the dollar value of all of your entries from Part 7. Write that number here

☐ Yes. Give specific information.......

page 5

Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Case 16-13487 Page 15 of 56

Case number (if known)

Document Debtor 1 **Husam Abdelqader**

| Part | 8: List the Totals of Each Part of this Form | | | |
|------|--|------------|------------------------------|-------------|
| 55. | Part 1: Total real estate, line 2 | | | \$62,500.00 |
| 56. | Part 2: Total vehicles, line 5 | \$700.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,900.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$1,030.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$3,630.00 | Copy personal property total | \$3,630.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$66,130.00 |

Official Form 106A/B Schedule A/B: Property page 6 Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main

| | | 1700.111110. | | N.I. |
|---|-------------------------|-------------------|-------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Husam Abdelgad | er | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Current value of the Amount of the exemption you claim

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property | portion you own | | | | |
|---|-------------------------------------|-----|---|-----------------------|--|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| 3814 W 116th Place Garden Homes, IL 60803 Cook County | \$62,500.00 | | \$15,000.00 | 735 ILCS 5/12-901 | |
| 1/2 interest in residence. Purchased in 2002 for 129,000. joint w/ non-filing spouse. value according to Epprasial is \$165,000. However Debtor states that similar homes in his neighborhood are sel Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 1998 Honda Passport 170,000 miles | \$700.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| Line Holli Schedule PVD. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 1/2 interest in kitchen, living room and bedroom furniture, joint w/ | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) | |
| non-filing so-signer Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| misc. household electronics including 5 televisions, laptop | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) | |
| computer and tablet Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 17 of 56
Case number (if known)

| De | nusaiii Abueiyauei | | | | | |
|----|--|---|---------|---|------------------------------------|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the Amount of the exemption you claim Sportion you own | | | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | personal wearing apparel Line from Schedule A/B: 11.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(a) | |
| | Line Holli Schedule Arb. 1111 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | pocket cash Line from Schedule A/B: 16.1 | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) | |
| | Elle Holli Geriedale PAB. 1011 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Checking: 1/2 interest in account at Chase Bank, joint w/ non-filing | \$30.00 | | \$30.00 | 735 ILCS 5/12-1001(b) | |
| | co-signer (50% of \$60.00) Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No | . , | | led on or after the date of adjustmen | nt.) | |
| | Yes. Did you acquire the property cover | ed by the exemption wi | ithin 1 | ,215 days before you filed this case | ? | |
| | □ No | | | | | |
| | ☐ Yes | | | | | |

| | Case : | 16-13487 | Doc 1 | Filed 04/20/16 Document | Entere Page 18 | d 04/20/16 15:1 R of 56 | 3:18 Desc N | 1ain |
|-------------------------|-----------------------------------|---------------------|------------------------|--|-------------------|---|--|--------------------------|
| Fill in th | nis informatio | n to identify you | ır case: | 1217121111111 | | | | |
| Debtor 1 | 1 H | usam Abdelqa | ıder | | | | | |
| | | st Name | Mid | dle Name | Last Name | | | |
| Debtor 2 (Spouse if, | | st Name | Mid | dle Name | Last Name | | | |
| United S | States Bankrup | tcy Court for the: | NORTH | ERN DISTRICT OF IL | LINOIS | | | |
| Case nu | umber | | | | | | | |
| (if known) | | | | | | | ☐ Check | if this is an |
| | | | | | | | amend | ded filing |
| Officia | al Form 10 |)6D | | | | | | |
| | | | Who F | lave Claims | Secure | d by Property | , | 12/15 |
| | | | | | | <u> </u> | | 4: W |
| s needed | d, copy the Addi | | | | | ually responsible for sup n the top of any additiona | | |
| • | if known). creditors have | claims secured by | , vour proper | tv? | | | | |
| | | • | | • | r schedules. Yo | ou have nothing else to | report on this form. | |
| _ | | f the information I | | .o ocurt man your cano | | ou have homming olde to | | |
| Part 1: | _ | ured Claims | | | | | | |
| | | | more than one | secured claim, list the cre | editor separately | Column A | Column B | Column C |
| for each of | claim. If more th | an one creditor has | a particular c | laim, list the other creditor ording to the creditor's nan | rs in Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 B a | ank Of Amer | ica | Describe th | e property that secures | the claim: | \$114,122.00 | \$125,000.00 | \$0.00 |
| Cre | editor's Name | | | 116th Place Garder | n Homes, | | | |
| | | | | Cook County est in residence. Pu | ırchased | | | |
| | | | in 2002 f | or 129,000. joint w | 1 | | | |
| | | | | g spouse. value ac sial is \$165,000. He | | | | |
| | | | | tates that similar h | | | | |
| No | c4-105-03-14 | l . | his neig | | | | | |
| | Box 26012 | | As of the da apply. | ate you file, the claim is: | : Check all that | | | |
| Gı | reensboro, N | NC 27410 | Continge | | | | | |
| Nur | mber, Street, City, S | State & Zip Code | Unliquida | | | | | |
| Who ow | es the debt? | Check one. | Disputed Nature of I | i ien. Check all that apply. | | | | |
| ☐ Debto | or 1 only | | ☐ An agree | ement you made (such as | mortgage or sec | cured | | |
| Debto | | | car loar | n) | | | | |
| | or 1 and Debtor 2 | | | / lien (such as tax lien, me | echanic's lien) | | | |
| | | otors and another | _ | nt lien from a lawsuit | | | | |
| | k if this claim re munity debt | elates to a | Other (in | cluding a right to offset) | Mortgage | | | |
| | | Opened 10/01/04 | | | | | | |
| | | Last Active | | | | | | |
| Date deb | ot was incurred | 3/14/16 | Last | 4 digits of account num | 3165 | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$114,122.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$114,122.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main

| _ | | Document | Page 1 | 9 of 56 | _ | |
|---|---|--|--|--|--|--|
| Fill in this info | rmation to identify your | case: | | | | |
| Debtor 1 | Husam Abdelgad | er | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| Inited States F | Sankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | | |
| orilled States L | diktupicy Court for the. | NORTHERN DIOTRIOT OF IE | LIIVOIO | | | |
| Case number (if known) | | | | | _ | Check if this is an mended filing |
| Official For Schedule | | /ho Have Unsecured | Claims | | | 12/15 |
| ny executory co schedule G: Exec schedule D: Crec eft. Attach the Co ame and case n | ntracts or unexpired leases cutory Contracts and Unexp litors Who Have Claims Sec | e Part 1 for creditors with PRIORIT that could result in a claim. Also I ired Leases (Official Form 106G). I ured by Property. If more space is le. If you have no information to response of Claims | ist executory of Do not include needed, copy | contracts on Schedule A/B any creditors with partially the Part you need, fill it ou | : Property (Officing recured claims t, number the en | ial Form 106A/B) and on that are listed in tries in the boxes on the |
| | itors have priority unsecure | | | | | |
| No. Go to | | u ciailis agailist you! | | | | |
| ■ No. Go to | Ραπ 2. | | | | | |
| | All of Your NONPRIORIT | V Uneccured Claims | | | | |
| | itors have nonpriority unsec | | | | | |
| _ | | | | | | |
| □ No. You h | nave nothing to report in this p | art. Submit this form to the court with | your other sche | edules. | | |
| Yes. | | | | | | |
| unsecured cl | aim, list the creditor separately | aims in the alphabetical order of the y for each claim. For each claim listed st the other creditors in Part 3.If you | d, identify what t | type of claim it is. Do not list | claims already inc | cluded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 1st El | ec Bnk | Last 4 digits of acc | ount number | 4960 | | \$1,633.00 |
| Nonprio | rity Creditor's Name | | | | | |
| | 10200 S Ste 200 v, UT 84070 | When was the deb | t incurred? | Opened 8/01/14 La 2/06/15 | ast Active | - |
| | Street City State Zlp Code | As of the date you | file, the claim | is: Check all that apply | | |
| _ | | - | | | | |
| _ | or 1 only | ☐ Contingent | | | | |
| | or 2 only | ☐ Unliquidated | | | | |
| | or 1 and Debtor 2 only | ☐ Disputed | NTV | d alaim. | | |
| | ast one of the debtors and and | | KITT unsecure | u ciaim: | | |
| ∐ Ched | ck if this claim is for a com | nunity | ag out of a cons | aration agreement or divorce | that you did not | |
| | aim subject to offset? | report as priority clai | | nation agreement of divorce | mai you did fiot | |
| ■ No | | ☐ Debts to pension | or profit-sharin | ng plans, and other similar de | ebts | |
| ☐ Yes | | Other. Specify | Charge Acc | count | | |
| 20 | | - Other. Specify | J | | | _ |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 20 of 56

Debtor 1 Husam Abdelgader Case number (if know) 4.2 \$4,162.00 Capital One Last 4 digits of account number 0057 Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/01/03 Last Active Po Box 30285 When was the debt incurred? 5/22/15 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes **Capital One** 4.3 Last 4 digits of account number 4148 \$1,775.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 12/01/01 Last Active Po Box 30285 When was the debt incurred? 2/05/15 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify **Chase Card Services** 4.4 Last 4 digits of account number 6966 \$1,898.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 3/01/10 Last Active Po Box 15298 When was the debt incurred? 3/25/15 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 21_of 56

Debtor 1 Husam Abdelgader Case number (if know) 4.5 \$1,821.00 **Chase Card Services** Last 4 digits of account number 6874 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 2/01/11 Last Active Po Box 15298 When was the debt incurred? 4/05/15 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.6 Citibank Sears Last 4 digits of account number 7558 \$2,579.00 Nonpriority Creditor's Name Centralized Bankruptcy Opened 8/01/14 Last Active Po Box 790040 When was the debt incurred? 5/14/15 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify 4.7 Citibank/Best Buy 1400 \$4,236.45 Last 4 digits of account number Nonpriority Creditor's Name Centralized Bankruptcy Opened 1/25/09 Last Active Po Box 790040 When was the debt incurred? 8/27/13 St Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 22 of 56

Debtor 1 Husam Abdelgader Case number (if know) 4.8 Citibank/The Home Depot \$1,575.00 Last 4 digits of account number 2802 Nonpriority Creditor's Name Centralized Bankruptcy Opened 3/01/07 Last Active Po Box 790040 When was the debt incurred? 4/30/15 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.9 **Comenity Bank** Last 4 digits of account number 1795 \$3,096.95 Nonpriority Creditor's Name Po Box 182125 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 **Comenity Bank** \$3.023.27 1971 Last 4 digits of account number 0 Nonpriority Creditor's Name Po Box 182125 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 23 of 56
Case number (if know)

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|-------|---|--|---|-------------|
| 4.1 | Credit First/CFNA | Last 4 digits of account number | 4909 | \$1,701.00 |
| | Nonpriority Creditor's Name Bk13 Credit Operations Po Box 818011 Clauderd OH 44181 | When was the debt incurred? | Opened 8/01/14 Last Active 12/17/15 | |
| | Cleveland, OH 44181 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.1 | Discover Financial | Last 4 digits of account number | 2967 | \$7,942.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 | When was the debt incurred? | Opened 10/01/07 Last Active 3/13/15 | |
| | New Albany, OH 43054 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | Ç | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 | Jared/Sterling Jewelers Nonpriority Creditor's Name | Last 4 digits of account number | 2161 | \$10,364.00 |
| | Attn: Bankruptcy | | Opened 8/01/14 Last Active | |
| | Po Box 3680 | When was the debt incurred? | 9/11/15 | |
| | Akron, OH 44309 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | ls the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other, Specify Charge Ace | count | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 24 of 56

Case number (if know) Debtor 1 Husam Abdelqader 4.1 Kohls/Capital One 7719 \$1,938.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 1/01/07 Last Active Po Box 3120 When was the debt incurred? 3/13/15 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 Mabt - Genesis Retail 4216 \$4,800.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 8/01/14 Last Active Po Box 4499 When was the debt incurred? 1/04/16 Beaverton, OR 97076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 Merrick Bank/Geico Card 8209 \$1,154.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 3/01/15 Last Active Po Box 23356 When was the debt incurred? 3/10/16 Pittsburg, PA 15222 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 25 of 56 Case number (if know)

| Debtor | 1 Husam Abdelqader | | Case number (if know) | |
|--------|---|--|---|------------|
| 4.1 | Midland Funding | Last 4 digits of account number | 5304 | \$3,666.00 |
| | Nonpriority Creditor's Name 2365 Northside Dr Suite 300 | When was the debt incurred? | Opened 10/01/15 | |
| | San Diego, CA 92108 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | | |
| | Yes | ■ Other. Specify Bank | Company Account Synchrony | |
| 4.1 | Portfolio Recovery | Last 4 digits of account number | 9078 | \$9,119.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 41067 | When was the debt incurred? | Opened 1/01/16 | |
| | Norfolk, VA 23541 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | ■ Other. Specify Factoring (| Company Account Citibank N.A. | |
| 4.1 | Portfolio Recovery Nonpriority Creditor's Name | Last 4 digits of account number | 8929 | \$2,313.00 |
| | Attn: Bankruptcy | When was the debt incurred? | Opened 12/01/15 | |
| | Po Box 41067 Norfolk, VA 23541 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | | |
| | Yes | ■ Other. Specify Bank | Company Account Synchrony | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 26 of 56 Case number (if know)

| Debto | or 1 Husam Abdelqader | | Case number (if know) | | | |
|-------|---|--|--|------------------|--|--|
| 4.2 | Portfolio Recovery | Last 4 digits of account number | 0915 | \$2,072.00 | | |
| 0 | Nonpriority Creditor's Name Attn: Bankruptcy | When was the debt incurred? | Opened 12/01/15 | 42,012.00 | | |
| | Po Box 41067 Norfolk, VA 23541 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | <u> </u> | _ ' | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | 1 claim: | | | |
| | ☐ At least one of the debtors and another | Student loans | a oldiiii. | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | | Company Account Synchrony | | | |
| 4.2 | Portfolio Recovery | Last 4 digits of account number | 2135 | \$1,608.00 | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 41067 | When was the debt incurred? | Opened 1/01/16 | | | |
| | Norfolk, VA 23541 Number Street City State Zlp Code Who incurred the debt? Check one. | s: Check all that apply | | | | |
| | ■ Debtor 1 only □ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | ■ Other. Specify Bank | | | | |
| 4.2 | Syncb/ashley Homestore | Last 4 digits of account number | 0657 | \$2,931.00 | | |
| | Nonpriority Creditor's Name Attn: Bankrupty Po Box 103104 Recovery CA 20076 | When was the debt incurred? | Opened 8/01/14 Last Active 9/30/15 | | | |
| | Roswell, GA 30076 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | ■ Other. Specify Charge Acc | count | | | |
| | | | | | | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 27 of 56
Case number (if know)

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|-------|--|---|---|------------|
| 4.2 | Syncb/hh Gregg Nonpriority Creditor's Name | Last 4 digits of account number | 8931 | \$4,093.00 |
| | Po Box 965036 Orlando, FL 32896 | When was the debt incurred? | Opened 8/01/14 Last Active 7/08/15 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | og plans, and other similar debts | |
| | Yes | Other Specify Charge Acc | | |
| 4.2 | Syncb/toysrusdc | Last 4 digits of account number | 5767 | \$2,896.00 |
| | Nonpriority Creditor's Name Attn: Bankrupty Po Box 103104 | When was the debt incurred? | Opened 11/01/13 Last Active 4/06/15 | |
| | Roswell, GA 30076 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | _ | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | d alaim. | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d Claim: | |
| | ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.2 | Synchrony Bank | Last 4 digits of account number | 1458 | \$3,099.00 |
| | Nonpriority Creditor's Name Value City Furniture Po Box 103104 | When was the debt incurred? | Opened 12/01/13 Last Active 9/30/15 | |
| | Roswell, GA 30076 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| | No | report as priority claims Debts to pension or profit-sharing | on plans, and other similar debts | |
| | | | | |
| | ☐ Yes | ■ Other. Specify Charge Acc | Journ | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 28 of 56

Debtor 1 Husam Abdelqader Case number (if know) 4.2 Synchrony Bank/Care Credit 0301 \$2,979.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 4/01/13 Last Active Po Box 103104 When was the debt incurred? 2/23/15 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.2 Synchrony Bank/Lowes 9577 \$2,844.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 8/01/07 Last Active Attn: Bankruptcy When was the debt incurred? Po Box 103104 5/14/15 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 The Bureaus Inc. 2037 \$3,089.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 650 Dundee Rd When was the debt incurred? Opened 1/01/16 Ste 370 Northbrook, IL 60062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Capital One N.A. ☐ Yes

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 29 of 56

Case number (if know)

| Debtor | 1 Husam Abdelqader | | Case number (if know) | | | | | | | |
|--------|---|---|---|------------|--|--|--|--|--|--|
| 4.2 | Tnb-Visa (TV) / Target Nonpriority Creditor's Name | Last 4 digits of account number | 6601 | \$8,436.00 | | | | | | |
| | C/O Financial & Retail Services Mailstop BV PO Box 9475 Minneapolis, MN 55440 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim i | | | | | | | | |
| | Who incurred the debt? Check one. | 7.5 57 111.5 441.5 754 111.5, 111.5 5141111 | or onotical that apply | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | | | | | |
| 4.3 | Us Bk Rms Cc Nonpriority Creditor's Name | Last 4 digits of account number | 5059 | \$8,141.00 | | | | | | |
| | Po Box 108 Saint Louis, MO 63166 | When was the debt incurred? | Opened 2/01/09 Last Active 2/25/15 | | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | As of the date you file, the claim is: Check all that apply | | | | | | | |
| | ■ Debtor 1 only | | | | | | | | | |
| | ☐ Debtor 2 only | | | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | • | | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | | | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | | | |
| | ■ No | Debts to pension or profit-sharin | | | | | | | | |
| | ☐ Yes ☐ Other. Specify Credit Card | | | | | | | | | |
| 4.3 | Us Bk Rms Cc Nonpriority Creditor's Name | Last 4 digits of account number | 5138 | \$2,533.00 | | | | | | |
| | Po Box 108 Saint Louis, MO 63166 | When was the debt incurred? | Opened 8/01/14 Last Active 3/25/15 | | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | | | | | |
| | Debtor 1 only | | | | | | | | | |
| | □ Debtor 2 only □ Unliquidated | | | | | | | | | |
| | □ Debtor 1 and Debtor 2 only □ Disputed | | | | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | | | | | | |
| | No | Debts to pension or profit-sharin | | | | | | | | |
| | Yes | Other Specify Credit Card | | | | | | | | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 30 of 56
Case number (if know)

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|--------------------------|---|--|--|-------------------------|--|--|--|--|
| 4.3 | Visa Dept Store National Bank | Last 4 digits of account number | 9870 | \$1,159.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053 | When was the debt incurred? | Opened 8/01/14 Last Active 5/06/15 | | | | | |
| | Mason, OH 45040 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | - | , | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sep report as priority claims | aration agreement or divorce that you did not | | | | | |
| | No | Debts to pension or profit-shari | ng plans, and other similar debts | | | | | |
| | ☐ Yes | | | | | | | |
| | ☐ Yes | Other. Specify Charge Ac | Count | | | | | |
| 4.3 | | | | • | | | | |
| 3 | Vonage Nonpriority Creditor's Name | Last 4 digits of account number | | \$0.00 | | | | |
| | Bankruptcy dept 23 Main Street | When was the debt incurred? | | | | | | |
| | Holmdel, NJ 07733 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated ☐ Disputed | | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | | | | | | |
| | ☐ Check if this claim is for a community | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sep report as priority claims | aration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | | | | |
| | Yes | Other. Specify Balance d | ue for unpaid services | | | | | |
| D1 O | - List Others to De Notifie d Alesse o D | alid Thad Van Alexa de L'ada d | | | | | | |
| is try have notifi | List Others to Be Notified About a D his page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out and Address | about your bankruptcy, for a debt that someone else, list the original creditor i nat you listed in Parts 1 or 2, list the add | n Parts 1 or 2, then list the collection agency litional creditors here. If you do not have add | here. Similarly, if you | | | | |
| Atlan | tic Credit & Finance Inc | | \square Part 1: Creditors with Priority Unsecured Clai | ms | | | | |
| _ | ox 12966 | | Part 2: Creditors with Nonpriority Unsecured | Claims | | | | |
| Roan | oke, VA 24030-2966 | Last 4 digits of account number | | | | | | |
| Name a | and Address | On which entry in Part 1 or Part 2 did yo | u list the original creditor? | | | | | |
| | & Gaines | | ☐ Part 1: Creditors with Priority Unsecured Clai | | | | | |
| | / Glenn Ave ling, IL 60090 | | Part 2: Creditors with Nonpriority Unsecured | Claims | | | | |
| Wilco | g, 12 00000 | Last 4 digits of account number | | | | | | |
| Name a | and Address | On which entry in Part 1 or Part 2 did yo | u list the original creditor? | | | | | |
| | al Management Services | | Part 1: Creditors with Priority Unsecured Clai | | | | | |
| | /2 South Ogden Street lo, NY 14206-2317 | ı | Part 2: Creditors with Nonpriority Unsecured | Claims | | | | |
| | , | Last 4 digits of account number | | | | | | |
| Name a | and Address | On which entry in Part 1 or Part 2 did yo | u list the original creditor? | | | | | |
| | t Services | | ☐ Part 1: Creditors with Priority Unsecured Clai | ms | | | | |

Official Form 106 E/F

Filed 04/20/16 Case 16-13487 Doc 1 Entered 04/20/16 15:13:18 Desc Main Page 31 of 56 Case number (if know) Document Debtor 1 Husam Abdelgader 3451 Harry Truman Blvd Part 2: Creditors with Nonpriority Unsecured Claims Saint Charles, MO 63301-4047 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Credit Control** Line 4.32 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankruptcy Department** ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 31179 Tampa, FL 33631 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Encore Receivable Management** Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 400 N Rogers Road ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 3330 Olathe, KS 66063-3330 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Encore Receivable Management** Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 400 N Rogers Road ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 3330 Olathe, KS 66063-3330 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Encore Receivable Management** Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 400 N Rogers Road Part 2: Creditors with Nonpriority Unsecured Claims PO Box 3330 Olathe, KS 66063-3330 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Professional Bureau Collection MD** Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 11050 Olson Drive ■ Part 2: Creditors with Nonpriority Unsecured Claims Suite 240 Rancho, CA 95670 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **United Recovery Systems** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 722929 Part 2: Creditors with Nonpriority Unsecured Claims Houston, TX 77272-2929 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address ☐ Part 1: Creditors with Priority Unsecured Claims Viking Client Services Line 4.8 of (Check one): **Bankruptcy Dept** Part 2: Creditors with Nonpriority Unsecured Claims Po Box 44997 Eden Prairie, MN 55344-2697 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Weltman, Weinberg & Reis Co., Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims L.P.A Part 2: Creditors with Nonpriority Unsecured Claims **Bankruptcy Department** 3705 Marlane Dr Grove City, OH 43123-8895 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Weltman. Weinberg & Reis Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 180 N LaSalle Street Suite 2400 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60601 Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

^{6.} Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Case 16-13487 Page 32 of 56 Case number (if know) Document

Debtor 1 Husam Abdelqader

| | | | | Total Claim |
|--------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| rom Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 114,676.67 |
| | | | | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main

| | | IAMAIIII. | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Husam Abdelqad | er | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the c | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-----------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | -, | | | | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main

| | | Documei | <u>nt Page 34 of 5</u> | <u>56 </u> | |
|---|---|---|---|--|-------|
| Fill in this info | ormation to identify your | case: | | | |
| Debtor 1 | Husam Abdelgad | ler | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check if this is an amended filing | |
| Official F | orm 106H | | | | |
| | e H: Your Cod | ebtors | | 12/1: | 5 |
| | | | | | |
| people are filing ill it out, and report out out, and report out out out out out out out out out ou | ig together, both are equ number the entries in the I case number (if known | ially responsible for suppl | ying correct information the Additional Page to th | complete and accurate as possible. If two married not find the control of the con | |
| ☐ No | | | | | |
| Yes | | | | | |
| | | u lived in a community pro , Nevada, New Mexico, Pue | | (Community property states and territories include ton, and Wisconsin.) | |
| ■ No. Go | to line 3. | | | | |
| ☐ Yes. Did | d your spouse, former spo | use, or legal equivalent live | with you at the time? | | |
| in line 2 a | gain as a codebtor only D), Schedule E/F (Officia | if that person is a guarant | or or cosigner. Make sur | your spouse is filing with you. List the person shore you have listed the creditor on Schedule D (Offis). Use Schedule D, Schedule E/F, or Schedule G to | icial |
| | umn 1: Your codebtor , Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the de Check all schedules that apply: | bt |
| 381 | ieh Abdelqader 4 W 116th Place p, IL 60803 | | | ■ Schedule D, line □ Schedule E/F, line □ Schedule G Bank Of America | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 35 of 56

| | in this information to identify your cotor 1 Husam Abd | | | | | | | | |
|--------------------|--|------------------------------|---|------------------------|----------------|-----------------------------------|--|--|--|
| | otor 2 | • | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | |
| (If kr | fficial Form 106I | | - | | | | led filing nent showir as of the f | ng postpetition chapter ollowing date: | |
| S | chedule I: Your Inc | ome | | | | | | 12/1 | |
| sup spo atta | as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing w | ng jointly, and your s ith you, do not inclu | spouse is de inform | livin ation | ig with you, inc about your sp | lude infori ouse. If m | mation about your ore space is needed, | |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor | 2 or non-f | iling spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | ■ Emp | loyed | | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | | ☐ Not | ☐ Not employed | | |
| | employers. | Occupation | self-employed/ | cashier | | bakery | <i>I</i> | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | Jewel | Food Sto | ores | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed t | here? | | | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to re | eport for a | ny lin | ne, write \$0 in th | e space. In | clude your non-filing | |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | n for all er | nploy | ers for that pers | on on the I | ines below. If you need | |
| | | | | | F | For Debtor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$_ | 0.00 | \$ | 990.60 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$_ | 0.00 | +\$ | 0.00 | |

0.00

\$

990.60

Calculate gross Income. Add line 2 + line 3.

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 36 of 56

| Deb | tor 1 | Husam Abdelqader | - | С | ase r | number (if known) | | | | |
|-----|--------------------|--|------------|----------|----------|-------------------|----------|--------------------------|----------------|------------------|
| | Cor | by line 4 here | 4. | | For | Debtor 1 | | or Debtor on-filing s | | |
| _ | · | | | | | | • | | | <u>·</u> |
| 5. | | all payroll deductions: | | | Φ. | | • | | | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a. 5b. | | \$ \$ | 0.00 | \$ \$ | | 140.75 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | φ \$ | 0.00 | \$ | | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | | \$ — | 0.00 | \$ | | 0.00 | _ |
| | 5e. | Insurance | 5e. | | \$ | 0.00 | \$ | | 0.00 | _ |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | \$ | | 0.00 | |
| | 5g. | Union dues | 5g. | | \$ | 0.00 | \$ | | 36.62 | _ |
| | 5h. | Other deductions. Specify: | 5h. | | \$ | | + \$ | | 0.00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | , | \$ | 0.00 | \$ | | 177.37 | <u>,</u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | (| \$ | 0.00 | \$ | | 813.23 | 3_ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | | \$ | 1,400.00 | \$ | | 0.00 | ı |
| | 8b. | Interest and dividends | 8b. | | \$ | 0.00 | \$ | | 0.00 |) |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | 0.00 | \$ | | 0.00 | <u>1</u> |
| | 8d. | Unemployment compensation | 8d. | | \$ | 0.00 | \$ | | 0.00 |) |
| | 8e. | Social Security | 8e. | | \$ | 0.00 | \$ | | 0.00 | <u> </u> |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. | | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8g. 8h. | Other monthly income. Specify: | 8g. 8h. | | ֆ \$ | 0.00 | | | 0.00 | _ |
| | OII. | Other monthly months. Specify. | _ 011. | | Ψ | 0.00 | · Ψ | | 0.00 | <u>'</u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 1,400.00 | \$ | | 0.0 | 0 |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 1 | ,400.00 + \$ | | 813.23 | = \$ | 2,213.23 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | – | • | - | | 010.20 | | 2,210.20 |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depe | | , | | • | Schedule | e J. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | | \$ | 2,213.23 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form | ? | | | | | | Combi month | ned ly income |
| | | No. | | | | | | | | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 37 of 56

| | in thin info | tion to identife | r. 00000 | <u>; </u> | | I | | |
|---------|----------------------------|-------------------------------------|------------------------|---|--|--------------|-------------------------------------|---|
| FIII | in this informa | tion to identify yo | our case: | | | | | |
| Deb | tor 1 | Husam Abde | lqader | | | | eck if this is: | |
| Deb | tor 2 | | | | | | An amended filing A supplement show | ving postpetition chapter |
| (Spc | ouse, if filing) | | | | | | 13 expenses as of | |
| Unit | ed States Bankr | uptcy Court for the: | : NORTH | IERN DISTRICT OF ILL | INOIS | | MM / DD / YYYY | |
| l | e number | | | | | | | |
| ` | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| So | chedule | J: Your I | Exper | ises | | | | 12/15 |
| Be info | as complete a | and accurate as | possible eded, atta | . If two married people ich another sheet to thi | | | | |
| | | ibe Your House | hold | | | | | |
| 1. | Is this a joir | | | | | | | |
| | ■ No. Go to | | in a separ | ate household? | | | | |
| | □и | | | | | | | |
| | ЦΥ | es. Debtor 2 mus | t file Offici | al Form 106J-2, Expens | es for Separate House | ehold of Deb | otor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Son | | 16 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 2 | Do your ove | sancas inaluda | _ | | | | | ☐ Yes |
| 3. | | oenses include f people other tl | han | No | | | | |
| | yourself and | d your depende | nts? ⊔ | Yes | | | | |
| | imate your ex | | our bankr | uptcy filing date unless | | | | apter 13 case to report f the form and fill in the |
| app | olicable date. | | | | | | | |
| the | value of sucl | h assistance and | | government assistance cluded it on <i>Schedule I</i> | | | Your exp | enses |
| (OII | ficial Form 10 | юі.) | | | | | Tour oxp | |
| 4. | | or home owners | | ses for your residence or lot. | . Include first mortgage | e 4. | \$ | 1,200.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | 4b. Prope | rty, homeowner's | s, or renter | 's insurance | | 4b. | : | 0.00 |
| | 4c. Home | maintenance, re | pair, and ι | ıpkeep expenses | | 4c. | \$ | 0.00 |
| | 4d. Home | owner's associat | ion or con | dominium dues | | 4d. | • | 0.00 |
| 5. | Additional r | nortgage payme | ents for vo | our residence, such as l | home equity loans | 5. | \$ | 0.00 |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 38 of 56

| ebtor 1 | Husam Abdelqader | Case num | ber (if known) | |
|-----------|--|--------------|----------------|------------------------|
| . Utiliti | ies: | | | |
| . 6a. | Electricity, heat, natural gas | 6a. | \$ | 250.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 140.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 200.00 |
| 6d. | Other. Specify: | 6d. | · | 0.00 |
| | d and housekeeping supplies | 7. | · | 600.00 |
| | dcare and children's education costs | 7. 8. | \$ | |
| - | | 9. | * | 0.00 |
| | ning, laundry, and dry cleaning | | \$ | 125.00 |
| | onal care products and services | 10. | \$ | 30.00 |
| | cal and dental expenses | 11. | \$ | 20.00 |
| | sportation. Include gas, maintenance, bus or train fare. | 12. | \$ | 400.00 |
| | ot include car payments. | 13. | · | 0.00 |
| | rtainment, clubs, recreation, newspapers, magazines, and books | | • | |
| | itable contributions and religious donations | 14. | \$ | 0.00 |
| 5. Insur | | | | |
| | ot include insurance deducted from your pay or included in lines 4 or 20. | 150 | ¢ | 0.00 |
| | Life insurance | 15a. | · | 0.00 |
| | Health insurance | 15b. | · | 0.00 |
| | Vehicle insurance | 15c. | · | 50.00 |
| | Other insurance. Specify: | 15d. | \$ | 0.00 |
| _ | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | _ | |
| Spec | • | 16. | \$ | 0.00 |
| | illment or lease payments: | | | |
| 17a. | Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b. | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. | Other. Specify: | 17c. | \$ | 0.00 |
| 17d. | Other. Specify: | 17d. | \$ | 0.00 |
| | payments of alimony, maintenance, and support that you did not report as | | · - | |
| | icted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| | r payments you make to support others who do not live with you. | | \$ | 0.00 |
| Spec | ify: | 19. | | |
|). Othe | r real property expenses not included in lines 4 or 5 of this form or on Sche | edule I: Yo | our Income. | |
| | Mortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | 20b. | \$ | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| | Homeowner's association or condominium dues | 20a. 20e. | | 0.00 |
| | | | · | |
| . Otne | r: Specify: | 21. | +\$ | 0.00 |
| 2 Calc | ulate your monthly expenses | | | |
| | Add lines 4 through 21. | | \$ | 3,015.00 |
| | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | 3,013.00 |
| | | | · | |
| 22c. / | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,015.00 |
| 3. Calci | ulate your monthly net income. | | | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,213.23 |
| | Copy your monthly expenses from line 22c above. | 23b. | | 3,015.00 |
| ۷۵۵. | oopy your monthly expenses non-line 220 above. | ۷۵۵. | Ψ | 3,015.00 |
| 220 | Subtract your monthly expenses from your monthly income | | | |
| ∠3C. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | -801.77 |
| | The result is your monthly her income. | 200. | L. | |
| 4 Do v | ou expect an increase or decrease in your expenses within the year after yo | ou file this | form? | |
| יע טכו.⊤ | xample, do you expect to finish paying for your car loan within the year or do you expect your | | | or decrease because of |
| For ex | | | | |
| | ication to the terms of your mortgage? | | , | |
| | ication to the terms of your mortgage? | | , | |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 39 of 56

| Fill in this infor | mation to identify your | case: | | | |
|----------------------|---|---------------------------------|---------------------------|-------------------------|-------------------------------------|
| Debtor 1 | Husam Abdelgad | er | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| o#: = | 4005 | | | | |
| Official For | | | _ | | |
| Declara ¹ | tion About a | ın Individual | Debtor's Sc | hedules | 12/15 |
| | | | | | |
| If two married p | eople are filing togethe | r, both are equally respons | sible for supplying cor | rect information. | |
| You must file th | is form whenever you fi | le hankruntov schedules (| or amended schedules | Making a false state | ement, concealing property, or |
| | | | | | 00, or imprisonment for up to 20 |
| years, or both. | 18 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | | • | |
| | | | | | |
| Sie | un Balaur | | | | |
| Sig | n Below | | | | |
| Did you be | w or agree to new come | one who is NOT an attorn | ov to boln you fill out b | ankruptov forma? | |
| Dia you pa | ay or agree to pay some | one who is NOT an attorn | ey to neip you iiii out b | ankrupicy forms? | |
| ■ No | | | | | |
| | Name of person | | | Attach Dan | kruptcy Petition Preparer's Notice. |
| ☐ Yes. | marile of person | | | | , and Signature (Official Form 119) |
| | | | | | , |
| | -16 | di at I bassa waa didha assassa | | deside detailements | |
| | arty of perjury, I declare re true and correct. | that I have read the summ | iary and schedules file | d with this declaration | on and |
| • | | | | | |
| | sam Abdelqader | | X | Dahtar 0 | |
| | n Abdelqader ure of Debtor 1 | | Signature of | Deptor 2 | |

Date _____

Date April 14, 2016

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 40 of 56

| Fill | l in this inforn | nation to identify you | r case: | | | |
|-------------------|---|--|--|---|--|---|
| | btor 1 | Husam Abdelga | | | | |
| De | DIOI I | First Name | Middle Name | Last Name | | |
| | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT O | OF ILLINOIS | | |
| | se number _ | | | | _ | Check if this is an mended filing |
| St Be | as complete a | of Financial | attach a separate sheet to | re filing together, both are | eankruptcy equally responsible for sup y additional pages, write you | |
| Pa | rt 1: Give D | Details About Your Ma | arital Status and Where You | Lived Before | | |
| 1. | What is you | r current marital statu | ıs? | | | |
| | ■ Married□ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Lis | at all of the places you I | ived in the last 3 years. Do no | ot include where you live now | <i>i</i> . | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territory | |
| | ■ No □ Yes. Ma | ake sure you fill out <i>Scl</i> | hedule H: Your Codebtors (Ol | ificial Form 106H). | | |
| Pa | rt 2 Explai | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$5,250.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | Operating a business | | ☐ Operating a business | |

Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Case 16-13487 Page 41 of 56
Case number (if known) Document

Debtor 1 Husam Abdelqader

| | | | | | Debtor 1 | | | | | Debtor 2 | | |
|-----|-------------|------------------------|--|---|--|---|--|---|--|---|-------------------------------------|---|
| | | | | | | of income that apply. | (bet | oss income fore deductions lusions) | s and | Sources of inco | | Gross income (before deductions and exclusions) |
| | | | dar year: December 3 | 31, 2015) | ■ Wages bonuses, | s, commissions, tips | | \$25,79 | 9.00 | ☐ Wages, commonuses, tips | missions, | |
| | | | | | ■ Opera | ting a business | | | | ☐ Operating a b | ousiness | |
| | | | lar year bef December 3 | | ■ Wages bonuses, | s, commissions, tips | | \$23,96 | 61.00 | ☐ Wages, commonses, tips | missions, | |
| | | | | | ■ Opera | ting a business | | | | ☐ Operating a b | ousiness | |
| | and o winni | other prings. I each s | oublic benefi f you are filir | t payments; pag a joint cas ne gross inco | pensions; re e and you l | ome is taxable. Exa ental income; interented income that y ach source separat | est; div ou rec | vidends; mone ceived together | y collecte , list it on | ed from lawsuits; r ly once under De | oyalties; and btor 1. | ecurity, unemploymen I gambling and lottery |
| | | | | | Debtor 1 | | | | | Debtor 2 | | |
| | | | | | | of income pelow. | eac (bet | oss income from th source fore deductions lusions) | | Sources of inco Describe below. | ome | Gross income (before deductions and exclusions) |
| Par | t 3: | List | Certain Pay | ments You | Made Befo | ore You Filed for E | Bankrı | uptcy | | | | |
| 6. | _ | No. | Neither De individual p During the S No. Yes * Subject to Debtor 1 o | btor 1 nor D rimarily for a 90 days befo Go to line 7. List below e paid that cre not include p o adjustment r Debtor 2 o | ebtor 2 ha personal, f re you filed ach credito editor. Do n payments t on 4/01/19 | amily, or household for bankruptcy, did or to whom you paid | mer d d purp d you p d a tota ts for o his ban s after mer d | lebts. Consumpose." pay any creditor al of \$6,425* or domestic support hkruptcy case. that for cases to | or a total or r more in ort obliga filed on o | of \$6,425* or mor one or more payi tions, such as chi r after the date of | e? ments and th ld support ar | (8) as "incurred by ar ne total amount you nd alimony. Also, do |
| | | | ■ No. □ Yes | | ach credito ments for d | | | | | | | creditor. Do not nclude payments to ar |
| | Cred | ditor's | s Name and | Address | | Dates of paymer | nt | Total amo | ount paid | Amount you still owe | Was this p | ayment for |

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 42 of 56

| Del | otor 1 | Husam Abdelqader | Document i | 2age 42 of 56 | ose number (if known) | | |
|-----|------------------|---|--|---|---|---------------------------------|--|
| 7. | Inside of wh | in 1 year before you filed for bankruptoers include your relatives; any general parich you are an officer, director, person in iness you operate as a sole proprietor. 10 ny. | rtners; relatives of any gen control, or owner of 20% o | eral partners; partner r more of their votin | erships of which yo g securities; and ar | u are a genera ny managing a | al partner; corporations agent, including one for |
| | | No Yes. List all payments to an insider. | Dates of payment | Total amount | Amount you | Posson for | this payment |
| | IIISIC | der 5 Name and Address | Dates of payment | paid | still owe | Reason for | uns payment |
| 8. | inside Includ | in 1 year before you filed for bankrupto er? de payments on debts guaranteed or cosi No | | ments or transfer a | any property on ac | ccount of a d | ebt that benefited an |
| | | Yes. List all payments to an insider | | | | | |
| | Insid | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name |
| Par | rt 4: | Identify Legal Actions, Repossession | s, and Foreclosures | | | | |
| | modif | Il such matters, including personal injury fications, and contract disputes. No Yes. Fill in the details. | cases, small claims action | s, divolocis, concent | on suits, paternity a | опона, заррог | tolicustody |
| | | e title e number | Nature of the case | Court or agency | | Status of th | ne case |
| 10. | | in 1 year before you filed for bankrupto k all that apply and fill in the details below | | erty repossessed, f | foreclosed, garnis | hed, attache | d, seized, or levied? |
| | _ | No. Go to line 11. Yes. Fill in the information below. | | | | | |
| | Cred | ditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | | Explain what happened | d | | | ргоролту |
| 11. | acco | in 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details. | | luding a bank or fi | nancial institution | , set off any a | amounts from your |
| | Cred | ditor Name and Address | Describe the action the | creditor took | Date a | action was | Amount |
| 12. | | in 1 year before you filed for bankrupto -appointed receiver, a custodian, or ar | | erty in the possess | ion of an assigne | e for the ben | efit of creditors, a |
| | _ | No Yes | | | | | |
| Par | rt 5: | List Certain Gifts and Contributions | | | | | |
| 13. | _ | in 2 years before you filed for bankrupt | tcy, did you give any gifts | s with a total value | of more than \$60 | 0 per person | ? |
| | | No Yes. Fill in the details for each gift. | | | | | |

per person

Address:

Describe the gifts

Value

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Dates you gave the gifts

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Page 43 of 56 Case number (if known) Document Debtor 1 Husam Abdelqader 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? \square No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Debtor sent cash because friend was \$2,000.00 Amira Aroub Morocco destitute Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Date of your Describe any insurance coverage for the loss Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. П No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Law Office of Thomas W. Lynch, P.C. Attorney Fees + reimbursement of various dates \$1,432,00 9231 S. Roberts Road \$335.00 filing fee and \$33.00 credit Hickory Hills, IL 60457 report twlpc@att.net 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was

Address

property transferred

Person's relationship to you

made

payments received or debts

paid in exchange

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Page 44 of 56 Case number (if known) Document Debtor 1 Husam Abdelgader 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No

| Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|---|---------------------------------|---|--|---|
| TCF Bank | XXXX- | □ Checking□ Savings□ Money Market□ Brokerage□ Other | closed due to lack of funds, closed mid 2015 | \$0.00 |
| Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. | year before you filed for | bankruptcy, any safe de | posit box or other depo | sitory for securities, |

21.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Nο

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)

Where is the property? (Number, Street, City, State and ZIP

Describe the property

Value

Desc Main Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Page 45 of 56 Case number (if known) Document

Debtor 1 **Husam Abdelgader**

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

| | | emeans any location, facility, or propert own, operate, or utilize it, including disp | ty as defined under any environmental la osal sites. | ₃w, whether you now own, op | erate, or utilize it or used |
|-----|--------|--|--|-----------------------------------|------------------------------|
| | | <i>rardous material</i> means anything an env ardous material, pollutant, contaminant | vironmental law defines as a hazardous t, or similar term. | waste, hazardous substance, | toxic substance, |
| Rep | ort a | II notices, releases, and proceedings th | nat you know about, regardless of when | they occurred. | |
| 24. | Has | any governmental unit notified you tha | at you may be liable or potentially liable | under or in violation of an env | vironmental law? |
| | | No Yes. Fill in the details. | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Hav | e you notified any governmental unit of | f any release of hazardous material? | | |
| | | No Yes. Fill in the details. | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 26. | Hav | re you been a party in any judicial or adı | ministrative proceeding under any envir | onmental law? Include settler | ments and orders. |
| | | No | | | |
| | | Yes. Fill in the details. | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
| Pai | rt 11: | Give Details About Your Business or | Connections to Any Business | | |
| 27. | Witl | hin 4 years before you filed for bankrup | tcy, did you own a business or have any | y of the following connections | s to any business? |
| | | ☐ A sole proprietor or self-employed i | in a trade, profession, or other activity, e | either full-time or part-time | |
| | | ☐ A member of a limited liability comp | pany (LLC) or limited liability partnership | p (LLP) | |
| | | ☐ A partner in a partnership | | | |
| | | ☐ An officer, director, or managing ex | ecutive of a corporation | | |
| | | ☐ An owner of at least 5% of the votin | ng or equity securities of a corporation | | |
| | | No. None of the above applies. Go to | Part 12. | | |
| | | Yes. Check all that apply above and fil | I in the details below for each business. | | |
| | | siness Name | Describe the nature of the business | Employer Identification | |
| | | dress mber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Do not include Social Se | ecurity number or ITIN. |
| | | | | | |

Document Page 46 of 56 Debtor 1 ase number (if known) Husam Abdelgader 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Husam Abdelqader Husam Abdelqader Signature of Debtor 2 Signature of Debtor 1 Date April 14, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Entered 04/20/16 15:13:18

Case 16-13487

Doc 1

Filed 04/20/16

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 47 of 56

| Fill in this inform | nation to identify your | case: | | | |
|---------------------------------|---|------------------------|---|------------------------|--|
| Debtor 1 | Husam Abdelqa | der | | | |
| Dahtar 0 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bar | kruptcy Court for the: | NORTHERN DIST | RICT OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | |
| | | | | | amended filing |
| | | | | | |
| Official For | | | | | |
| Statemen | t of Intention | on for Indiv | <u>iduals Filing Under C</u> | hapter 7 | 12/15 |
| If you are an indiv | vidual filing under cha | anter 7 vou must fill | out this form if- | | |
| | claims secured by ye | | out this form in | | |
| you have lease | ed personal property | and the lease has n | | | |
| | | | you file your bankruptcy petition or by the time for cause. You must also send co | | |
| on the fe | | | | • | • |
| | ople are filing togethed | er in a joint case, bo | h are equally responsible for supplying | correct information | n. Both debtors must |
| | nd accurate as possi ur name and case nu | | needed, attach a separate sheet to this | form. On the top of | f any additional pages, |
| Part 1: List Yo | ur Creditors Who Hav | ve Secured Claims | | | |
| | | | Creditors Who Have Claims Secured b | y Proporty (Official | Form 106D) fill in the |
| information bel | low. | | | | • |
| Identify the cre | ditor and the property | that is collateral | What do you intend to do with the pro secures a debt? | | l you claim the property exempt on Schedule C? |
| | | | | | |
| Creditor's Ba | ank Of America | | ☐ Surrender the property. | | No |
| name: | | | Retain the property and redeem it. | _ | |
| Description of | 3814 W 116th Pla | ce Garden | ☐ Retain the property and enter into a Reaffirmation Agreement. | • | Yes |
| property | Homes, IL 60803 1/2 interest in res | | Retain the property and [explain]: | | |
| securing debt: | Purchased in 200 | 2 for 129,000. | | | |
| | joint w/ non-filing value according t | | | | |
| | \$165,000. Howev | er Debtor | B.14 | | |
| | states that similar | r homes in his | Debtor will retain collateral and of making payments | continue | |
| | | | | | |
| | ur Unexpired Person | | in Schedule G: Executory Contracts and | d Unexnired Leases | (Official Form 106G), fill |
| in the information | below. Do not list re | al estate leases. Un | expired leases are leases that are still in he trustee does not assume it. 11 U.S.C. | n effect; the lease po | |
| Describe your ur | nexpired personal pro | pperty leases | | Will the | lease be assumed? |
| Lessor's name: | | | | П м. | |
| Description of leas | sed | | | □ No | |
| Property: | | | | ☐ Yes | |
| | | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 48 of 56

| Deb | tor 1 | Husam Abdelqader | Case number (if known) | |
|--------------|-------------------|---|---|-------------------------------|
| | | | | |
| | sor's n | | | □ No |
| | criptio perty: | n of leased | | ☐ Yes |
| | sor's n | | | □ No |
| | criptio perty: | n of leased | | ☐ Yes |
| | sor's n | ame: n of leased | | □ No |
| | criptio perty: | n on leased | | ☐ Yes |
| | sor's n | | | □ No |
| | criptio perty: | n of leased | | ☐ Yes |
| | sor's n | | | □ No |
| | criptio perty: | n of leased | | ☐ Yes |
| | sor's n | | | □ No |
| | criptio perty: | n of leased | | ☐ Yes |
| Part | 3: | Sign Below | | |
| Unde prop | er pen erty tl | alty of perjury, I declare that I have in | ndicated my intention about any property of my estate that se | cures a debt and any personal |
| Х | /s/ H | lusam Abdelqader | X | |
| | Hus | am Abdelqader ature of Debtor 1 | Signature of Debtor 2 | |
| | Date | April 14, 2016 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-13487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main Document Page 53 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Husam Abdelqader | | Case No. | |
|--------|---|---|------------------------------------|-------------------------------------|
| | - | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSA | TION OF ATTOR | NEY FOR DI | EBTOR(S) |
| С | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or i | he petition in bankruptcy, or | r agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 1,432.00 |
| | Prior to the filing of this statement I have received | | | 1,432.00 |
| | Balance Due | | . \$ | 0.00 |
| 2. \$ | 335.00 of the filing fee has been paid. | | | |
| 3. Т | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. Т | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. I | ■ I have not agreed to share the above-disclosed compensation | ion with any other person un | nless they are mem | bers and associates of my law firm. |
| I | ☐ I have agreed to share the above-disclosed compensation of copy of the agreement, together with a list of the names of | | | |
| 6. I | In return for the above-disclosed fee, I have agreed to render l | legal service for all aspects of | of the bankruptcy | case, including: |
| b c | Analysis of the debtor's financial situation, and rendering a Preparation and filing of any petition, schedules, statement Representation of the debtor at the meeting of creditors and [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on househ | t of affairs and plan which med confirmation hearing, and the to market value; exemes needed; preparation a | nay be required; any adjourned hea | rings thereof; |
| 7. E | By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any dischar any other adversary proceeding. | | | es, relief from stay actions or |
| | CE | ERTIFICATION | | |
| | certify that the foregoing is a complete statement of any agreankruptcy proceeding. | eement or arrangement for pa | ayment to me for r | representation of the debtor(s) in |
| Aı | pril 14, 2016 | /s/ Thomas W. Lynd | ch | |
| Date | | Thomas W. Lynch (| | |
| | | Signature of Attorney Law Office of Thon | nas W Lynch B | C |
| | | 9231 S. Roberts Ro | | |
| | | Hickory Hills, IL 604 | 457 | |
| | | (708) 598-5999 Fax | k: (708) 598-629 | 9 |
| | | twlpc@att.net Name of law firm | | |
| | | rvame oj taw jirm | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Husam Abdelqader | | Case No. | | |
|-------|---|---|-----------|----|--|
| | • | Debtor(s) | Chapter 7 | | |
| | VEF | RIFICATION OF CREDITOR MA | TRIX | | |
| | | Number of Creditors: | | 39 | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | |
| Date: | April 14, 2016 | /s/ Husam Abdelqader Husam Abdelqader Signature of Debtor | | | |

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3 Dacumentrum Page 55 of 56 Saint Charles, MO 63301-4047

2365 Northside Dr Suite 300 San Diego, CA 92108

Atlantic Credit & Finance Inc PO Box 12966 Roanoke, VA 24030-2966

Comenity Bank Po Box 182125 Columbus, OH 43218

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Credit Control Bankruptcy Department PO Box 31179 Tampa, FL 33631

Professional Bureau Collection MD 11050 Olson Drive Suite 240 Rancho, CA 95670

Blitt & Gaines 661 W Glenn Ave Wheeling, IL 60090

Credit First/CFNA Bk13 Credit Operations Po Box 818011 Cleveland, OH 44181

Syncb/ashley Homestore Attn: Bankrupty Po Box 103104 Roswell, GA 30076

Capital Management Services 698 1/2 South Ogden Street Buffalo, NY 14206-2317

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Syncb/hh Gregg Po Box 965036 Orlando, FL 32896

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Encore Receivable Management 400 N Rogers Road PO Box 3330 Olathe, KS 66063-3330

Syncb/toysrusdc Attn: Bankruptv Po Box 103104 Roswell, GA 30076

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Jared/Sterling Jewelers Attn: Bankruptcy Po Box 3680 Akron, OH 44309

Synchrony Bank Value City Furniture Po Box 103104 Roswell, GA 30076

Citibank Sears Centralized Bankruptcy Po Box 790040 Saint Louis, MO 63179

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Synchrony Bank/Care Credit Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Citibank/Best Buy Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Mabt - Genesis Retail Po Box 4499 Beaverton, OR 97076

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Citibank/The Home Depot Centralized Bankruptcy Po Box 790040 Saint Louis, MO 63179

Merrick Bank/Geico Card Po Box 23356 Pittsburg, PA 15222

The Bureaus Inc. 650 Dundee Rd Ste 370 Northbrook, IL 60062 Tnb-Visa (TC) a\$e_146_43487 Doc 1 Filed 04/20/16 Entered 04/20/16 15:13:18 Desc Main C/O Financial & Retail Services Document Page 56 of 56

Mailstop BV PO Box 9475

United Recovery Systems PO Box 722929 Houston, TX 77272-2929

Minneapolis, MN 55440

Us Bk Rms Cc Po Box 108 Saint Louis, MO 63166

Viking Client Services Bankruptcy Dept Po Box 44997 Eden Prairie, MN 55344-2697

Visa Dept Store National Bank Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Vonage Bankruptcy dept 23 Main Street Holmdel, NJ 07733

Wafieh Abdelqader 3814 W 116th Place Alsip, IL 60803

Weltman, Weinberg & Reis Co., L.P.A Bankruptcy Department 3705 Marlane Dr Grove City, OH 43123-8895

Weltman. Weinberg & Reis 180 N LaSalle Street Suite 2400 Chicago, IL 60601